UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: 0/30/03 2 Serial/Patent # 01/803,522				
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal		; ;	\$
X	Petition	5	5/1/03	\$ 1300
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT S /300		
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
	Overpayment	Credit Deposit A/C #:		
	Duplicate Payment	,50-063/		
X	No Fee Due (Explanation):			
Petition Dismissed AS Most.				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: [MINGLE SMITH] TITLE: PUBLICATION				
SIGNATURE: PHONE: 1/3/308-6///				
office: At Attons				
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: (lecialist) DATE: 7/1/03				

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B